

Details of your skills or experience within the field of ecology, natural history plus any other relevant information:

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Details of any additional skills or experience which would be of value as a Trustee of the Jersey Ecology Fund:

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Provide details of why you are applying for the position and why you should be considered for this role.

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Section C – Referee details

Please provide contact details of two people who can provide a reference. (The referee cannot be a relative)

Referee 1

Full name:			
Address inc post code:			
Contact number:		Email address:	

Referee 2

Full name:			
Address inc post code:			
Contact number:		Email address:	

Section D – Declaration

Important information:

Before signing this form please read the following consent information carefully. It explains how your personal data will be used and provides a brief description of your rights under Jersey's Data Protection Law. For further information on how the Department of the Environment handles personal data please visit <http://www.gov.je/howweuseyourinfo>

Your consent

I declare that this application is made with my authority. I am aware that it's an offence to submit false or misleading information with an application.

I am aware and agree to the information supplied in this form, together with any other accompanying information, to be used to process my application for position of Trustee of the Jersey Ecology Fund.

I am aware and agree that the information supplied in this form, together with any other accompanying information may be discussed with the trustees or anyone involved in the recruitment of a new trustee.

I understand that you will not use my personal information for any other purpose, without my permission, unless you are legally required to do so.

I understand that under Jersey's Data Protection Law I have the right to withdraw my consent to the further processing of my information. However, I understand that this may cause delays in administering my application. (Should you wish to exercise this right please contact us on tel. 441600).

Applicant declaration

Signature:		Date:	
Full name:			